

Members

Sen. Connie Lawson, Chairperson
Sen. Vi Simpson
Rep. Charlie Brown
Rep. Cindy Noe
Amy Cook-Lurvey
Richard Culver
David M. Giles, M.D.
Galen Goode
Gloria Kardee
Bryan Lett
Dr. Loretta Kroin



INDIANA COMMISSION ON MENTAL HEALTH

Legislative Services Agency
200 West Washington Street, Suite 301
Indianapolis, Indiana 46204-2789
Tel: (317) 233-0696 Fax: (317) 232-2554

LSA Staff:

Susan Kennell, Attorney for the Commission
Kathy Norris, Fiscal Analyst for the Commission

Authority: P.L. 243-2003

MEETING MINUTES¹

Meeting Date: September 8, 2003
Meeting Time: 1:00 P.M.
Meeting Place: State House, 200 W. Washington St.,
Room 130
Meeting City: Indianapolis, Indiana
Meeting Number: 2

Members Present: Sen. Connie Lawson, Chairperson; Sen. Vi Simpson; Rep. Charlie Brown; Rep. Cindy Noe; Amy Cook-Lurvey; Richard Culver; David M. Giles, M.D.; Gloria Kardee; Bryan Lett; Dr. Loretta Kroin; Abigail Flynn; Elaine Doss.

Members Absent: Galen Goode; Donna Gibson.

1. Call to Order

Senator Lawson called the meeting to order at 1:10 P.M. and asked for a moment of silence for Governor O'Bannon and his family. Senator Lawson asked the two new members who were present to introduce themselves.

2. Discussion of Issues Concerning Children with Mental Health Needs Who Are in the Criminal Justice System

(a) **Senator Billie Breaux** told the members that she had introduced SR 22 for the purpose of obtaining more information on issues surrounding children with mental health needs who have been placed in the criminal justice system.

(b) **Mary Stewart, Director of Community Development, Midtown Community Mental Health Center**, reported that good things are happening now in the area of mental

¹ Exhibits and other materials referenced in these minutes can be inspected and copied in the Legislative Information Center in Room 230 of the State House in Indianapolis, Indiana. Requests for copies may be mailed to the Legislative Information Center, Legislative Services Agency, 200 West Washington Street, Indianapolis, IN 46204-2789. A fee of \$0.15 per page and mailing costs will be charged for copies. These minutes are also available on the Internet at the General Assembly homepage. The URL address of the General Assembly homepage is <http://www.ai.org/legislative/>. No fee is charged for viewing, downloading, or printing minutes from the Internet.

health services for children. Indiana is a national leader. There is a significant presence in schools. The state is on the brink of approval for a Medicaid waiver where the income of the child, and not the income of the parents, is the determining factor for the receipt of payment for services. On the negative side, there has been a significant reduction in services. The lack of funding is creating more challenges.

In answer to questions, Ms. Stewart confirmed that there is a disparity among Indiana counties as to the number of children with mental health problems who are in the correctional system and the services that are available to children and families when the children go home after incarceration. According to Ms. Stewart, children who return to their communities face a variety of problems including changes in their families, school issues, and continued interaction with other youth offenders. Ms. Stewart would like to see a system developed with a family-based model. Ms. Stewart said that she did not see overuse of Ritalin as a problem. Ms. Stewart said that she did not think that parents were having their children declared as CHINS to receive some mental health services in the correctional system just because services were not available from the mental health system.

(c) Mr. Scott Cleveland, General Counsel for the Mental Health Association of Indiana, provided testimony to the Commission concerning juveniles and mental health issues. (Exhibit 1) In answer to questions, Mr. Cleveland said that the decision whether or not to assess juveniles for mental health problems is left to the judges. Mr. Cleveland said that there were standardized tools available. During the discussion on pre-screening, Judge Richard Cluver indicated that without early screening, it is sometimes very hard to identify the real problem in CHINS proceedings. It is difficult to determine if behavior, such as using drugs, is the problem or if the behavior is really an escape from other situations in the home.

Mr. Cleveland further stated that children with mental illness are four times as likely to have drug or alcohol problems. This makes early diagnosis and treatment very valuable. Showing affection and paying attention to children are important in the development of children. According to Mr. Cleveland, blended funding must be achieved to provide the proper services at the right time.

(d) Ms. Deborah Washburn, Children's Committee, NAMI, provided the Commission with information on NAMI's issues with mental health services for children who are in the criminal justice system. (Exhibits 3 and 4) Ms. Washburn told the Commission that twenty percent of the children have mental health problems, but only one in five of those children actually receives services. She stated her belief that sometimes parents actually get their children in the criminal justice system as a means of receiving help.

(e) The Honorable Robert Freese, Judge, Hendricks County Superior Court One, reported to the Commission an instance where the Department of Correction filed for civil commitments for two young men. Both were sexual offenders who had been at Plainfield for about three years. As they approached their 21st birthdays, the facility was seeking civil commitment. When asked what was different to precipitate the civil commitment now from when they were initially sent to Plainfield, Judge Freese was told that nothing was different. His concern is that they should have been receiving mental health treatment from the beginning of their commitment to Plainfield. If the first child had been tried as an adult, he would likely have been found incompetent to stand trial which, according to Judge Freese, is not an option for juveniles. Members also expressed concern that if all persons were appropriately diagnosed, the state would need to be sure that the appropriate mental health facilities are available in the state.

There was discussion that it might help if the Department of Correction had more

discretion in placement of juveniles after sentencing. The Department of Correction testified that there are intake assessments for all of the juveniles coming into the system and that mental health services are being provided.

(f) Suzanne Clifford Director of Division of Mental Health and Addiction, Family and Social Services Administration, reported on children's services. (Exhibits 5 and 6) Ms. Clifford told the Commission that there is a massive shortage of child psychiatrists. The Division is working with Indiana University to train and retain more child psychiatrists in Indiana. Early intervention and a team approach of "swarming" around families with services have proven effective. One of the challenges the Division faces as it develops more effective tools for identifying persons who need services is that there will be more people needing services from a system that is already strained. Ms. Clifford also mentioned the problems attached to the lack of procedures for juveniles who, if they were adults, would be determined to be incompetent to stand trial.

3. Presentations by State Agencies Providing Services to Persons with Mental Illness

(a) Melanie Bella, Office of Medicaid Policy and Planning, provided the members with a summary of Medicaid funding for behavioral health. (Exhibit 2) Ms. Bella told the members that more detailed data exists, and, in response to questions of Commission members, she will provide additional data. In response to a question from the Commission, the members were told that a pharmacy manager handles questions from doctors for authorization of medications.

(b) Zach Cattell, Department of Health, testified that the Department of Health has very few dollars for services in the mental health area. (Exhibit 7) Ms. Suzanne Clifford said that efforts were being made to get more mental health professionals in the same buildings as health professionals to allow for more interaction.

(c) Bob Marra, Department of Education, reported to the Commission on programs within the Department of Education. (Exhibit 8) Mr. Marra discussed the problems with attracting and retaining teachers. There was discussion on the adequacy of training required for persons serving as aides. The teachers are highly credentialed, but the standards for training of aides are not as rigorous. There was discussion on the need for early identification and assessment of children with mental health problems.

(d) Diane Mains, Department of Correction, was accompanied by **Dr. Dean Rieger, Medical Director, Dr. Tom Hanlon, Plainfield, and Dr. Anita Glasson, Prison Health Services.** Ms. Mains told the Commission that mental health screening takes place for all inmates during the intake process. After the initial screening, decisions are made to place inmates where they can best receive needed services. The mental health screening takes place within a short period of time. If the Department has information that an inmate was on suicide watch before transfer, they speed up the mental health part of the screening. They evaluate all medication inmates are receiving, and the medical team evaluates what medications the inmate will receive while in the prison system.

The Department uses its own formulary for medications. It does not use the same formulary as is used for Medicaid. Because of the source or funding for addiction programs, there is a waiting list for addiction services. The Department prioritizes who receives treatment for addictions based on release dates. Prior to release, it is the Department's policy that a person is given a thirty-day supply of medications, and the Department works to make contacts and appointments for the person in the community within that thirty-day period. If an inmate is ready for release but a danger to himself or herself, the Department applies for civil

commitment. That happens about thirty or forty times a year.

Dr. Rieger provided the Commission with a study from Massachusetts concerning drug formularies. (Exhibit 9) Dr. Rieger told the members that the ratio of psychiatrists to inmates is one psychiatrist to two hundred inmates. There was discussion of the impact of the Department's smoking ban on inmates. While there may be some mental health benefits to smoking, the impact on health outweighs any mental health benefit. Instituting the smoking ban went remarkably well. In answer to questions, the Department stated that they are constantly training guards to identify mental health problems as they arise with inmates.

4. Future Meetings

The next meeting will be October 6 in Evansville at the Evansville Psychiatric Treatment Center for Children.

5. Adjournment

The meeting was adjourned at 5:10 P.M.